Effective October 1, 2000

**Application or Docket Number** 

09/690201

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column	1)	(Colu	mn 2)	, i			OR	_		
TOTAL OLATIVIS					LI XX			RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			35 minus 20= *			5	i	X\$ 9=		OR	X\$18=	270,	
INDEPENDENT CLAIMS			У minus 3 =  * /				I	X40=		OR	X80=	80.	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1060.	
CLAIMS AS AMENDED - PART II										-	OTHER	THAN	
		(Column 1)		(Colu		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MI	Minus	***	T CL AIM	=		X40=		OR	X80=		
<b>L</b>	FINOT FRESE	NIATION OF MI	JEHIPLE DER	ENDEN	CLANIVI			+135=		OR	+270=		
							<b>.</b>	TOTAL		OR	TOTAL		
		(Column 1)		(Calu	mn 2)	(Column 2)	P	DDIT. FEE			ADDIT. FEE		
	iida ca i i	CLAIMS		HIGH	HEST	(Column 3)	Г	-	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On			
								+135=		OR	+270=		
						,	A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	H	X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╌			OR	7,00-		
• 1	f the entry in calcu	mn 1 is loss than th	o ontry in solv	mm () weith	o "O" in ani			+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													